

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>4-17-95</u>		2 Serial/Patent # <u>5238948</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.	11	2/1/95	\$ 100.00							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
<div style="border: 1px solid black; height: 40px; width: 100%; background-color: #cccccc;"></div>		7 TOTAL AMOUNT OF REFUND		\$ 100.00							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
Overpayment		Credit Deposit A/C #:									
Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>1</td><td>3</td><td>--</td><td>3</td><td>7</td><td>2</td><td>3</td></tr></table>			1	3	--	3	7	2	3
1	3	--	3	7	2	3					
No Fee Due (Explanation):											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>EVA James</u>			TITLE: <u>Legal Assistant E.</u>								
SIGNATURE: <u>EVA James</u>			PHONE: <u>305-8047</u>								
OFFICE: <u>Cert. of Correct. Br.</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Audrey J. J. J.</u>			DATE: <u>4/19/95</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 302B